The Editorial Board of the Revue d’Orthopédie Dento-Faciale takes great pleasure in offering you this special issue devoted to hyperdivergence.

This theme is really dear to our hearts because excessive facial height without any doubt poses challenges to us that are among the most daunting we have to face not just in attaining the objectives of our treatment and in maintaining their long term stability but also because dealing with this deformity places our specialty at the center of a cooperative enterprise that enlists specialties like otolaryngology, maxillo-facial surgery, allergy, pediatrics, plastic surgery, psychiatry, and speech therapy, groups with which we ordinarily have little opportunity to interact.

Is the long face syndrome a malady impossible to cope with? Must we fold our arms in despair when asked to help children who cannot breathe normally through their noses? Opinions are fiercely divided on this issue.

Professor Vincent KOKICH who was gracious enough to grant us an interview during the farewell meeting that took place in Dubrovnik in September 2009, in which he states that there is no way to alter the vertical dimension of the lower part of the face; coercive devices like tongue guards, guides, or spikes are more reliable in treating open bite than hypothetical enlistment of patients to refrain from tongue thrusting after myofunctional therapy with a speech therapist. He also discussed the effect of the face on the smile line.

Other authors review the diagnostic role of orthodontists.

Articles on the contributions that can be made by 3D X-Ray scanning have occupied prominent positions in professional journals in recent years. Associate Professor of Orthodontics at Case Western Reserve University in Cleveland, USA, Dr. Manish VALIATHAN and his co-authors have given us the results of their latest research on how to evaluate changes in upper airway volume following distraction osteogenesis.

We know that orthodontists have a preventive as well as a therapeutic role to play.

In this sense, Dr. Bruno Bonnet emphasizes the vital importance of cooperation between orthodontic specialists and their colleagues in otolaryngology by presenting three clinical cases treated with continuous orthopedic forces. His article, which is...
available at no fee on the Revue site: www.revue-odf.org, will be published in our 2010 issue number 4.

Dr. Jean-Marie Landeau, who has been regularly practicing retraining functional therapy for some ten years, discusses the advantages and disadvantages that other practitioners who undertake to employ this procedure can expect to encounter.

But, in order to cooperate effectively, orthodontists and otolaryngologists must learn how to treat the problems of their patients with a global view.

Should the ENT specialist be called upon to intervene in cases of upper airway obstruction? If so, in what type of cases? And should they begin their ministrations when children are passing through puberty or should they wait until this stage is over. Are local applications of corticoid steroids effective? Should they be continued over the long term? We understand that there is a consensus on this subject, one that takes into account the risk/effectiveness ratio for the individual patient as has been discussed and established by ENT specialists. But do they also take into account the relationship of obstruction of the upper airways and irreversible alteration of growth phenomena and development of the face?

Answering some questions, Dr. Jacques TALMANT, who is certainly one of the most authoritative French orthodontists working in this field, a notable expert on breathing problems and advocate of the need for practitioners to include a physiological approach to assure the success of their treatments, joins with Dr. Joël DENAUD in explaining how to establish a diagnosis based on the innovative notion of nasal breathing at optimal rest.

Doctors Aben Moha, an ENT specialist, and Bruno BONNET join forces to elucidate the diagnostic and therapeutic approach to treating patients still in their growth period who have upper airway obstructions, answering, among others, such fundamental questions as: Who should intervene first, the ENT specialist or the orthodontist? When should this intervention begin? What type of intervention should this be and for what types of patients? and What kinds of long term results can be expected?

Doctors Jean-Claude TALMANT, Jean-Christian TALMANT, and Jean-Pierre LUMINEAU, plastic surgeons, take up the controversial subject of surgery of the nasal septum and turbinate bones during the growth period.

When we have not been able to restrain the vertical growth of the face using non or minimally invasive procedures, the only remaining recourse is to maxillo-facial surgical intervention that will enable patients to close their lips comfortably at rest.

Doctors Jean-François TULASNE and Éric SOLYOM report in detail how delicate these procedures are, the limits to their stability, and illustrate their methods magnificently with records of treated cases.

For those of you who have not yet had the pleasure of encountering the work of the philosopher Paul CLAVIER we are delighted to introduce you to his sprightly humor and profound thought by publishing his essay as the editorial for this issue.
Supérieure on rue d’Ulm in Paris, Paul CLAVIER has written many books, the latest of which are *The Argus aspect of moral values* and *What is the Good?* Speaking from the base of his wide eclectic cultural informational storehouse, Professor CLAVIER makes it possible for all readers to incorporate philosophy into their daily lives, stimulates us all to ask questions, and not to stagnate but to move forward. He has the cultural depth, the wit, and the talent to synthesize a variety of approaches on a theme of reflection; he makes his point of view crystal clear while leaving to each of us our free choice.

Reading this special issue will stimulate discussions that we hope will be fruitful and, we hope, above all, will lead to a rapprochement between different medical specialties. Orthodontists and maxillo-facial surgeons have long worked together effectively. But orthodontists and ENT specialists, whose cooperation is often essential for the removal of obstacles to proper treatment especially in cases of the complex deformity of hyperdivergence, have not yet forged the same kinds of cordial working relationships.